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I.

Facts and Remarks relating to the Influence of decomposing Animal Matter in producing Fevers.

(Continued from p. 24.)

THE facts stated in the two preceding papers are of some importance to the police of large towns.

Wherever considerable bodies of men are collected together, cleanliness is as necessary to health as it is to comfort. The means employed to obtain and preserve it, must be regulated by a knowledge of such facts as we have been calling into notice, and not by prejudices and visionary theories, such as form the basis of the police of a great number of cities, and the consequence of which must be an ill-directed expenditure of the public money. Large sums are appropriated to objects of comparatively small importance, and a disproportionate share is left for those which are great, and indispensable to the security of the public.

Let us apply the facts before stated, and the inferences which may be derived from them legitimately, to some of the objects of the police of large cities.

First, we may consider their application to the interment of dead bodies in the midst of towns. Nearly all the well authenticated facts which have been stated, appear to justify the belief that burying places in towns are perfectly innocent in producing fevers or other malignant diseases. The case of the cemetery of the Innocens in Paris, taken alone, is quite sufficient to show that malignant fevers are not generated by such causes. At least, we must so consider it, unless we can adduce positive, countervailing facts. That cemetery, consisting of about three acres, received, it appears, six hundred thousand bodies: thirty thousand had been deposited within a short time,—ninety thousand within the life of one man. The soil was filled with, or composed of, an immense mass of animal matter, and this being elevated above the surrounding grounds, pressed in upon the cellars of the vicinity, and filled them with the salts and other combinations arising from animal matter. But, although the neighboring houses were greatly annoyed by the influence of this formidable accumulation, they were not the seats of fevers or other diseases, either common or contagious. When the inconvenience became so great as to require a remedy, then the bodies, in every stage of decomposition, were taken up and removed, under strong apprehensions of ill consequences. These apprehensions proving to be unfounded, the removal was continued without any peculiar precautions, during summer as well as winter, and no disease either attended or followed this extraordinary disinterment.

This is not a solitary case. Similar occurrences have been noticed in other places, and they are abundantly sufficient to show that there is no ground for the apprehensions that burial grounds cause fevers or other diseases.

There is a mode in which very large collections of putrefying bodies may be mischievous in towns,—this is by contaminating the water of wells. The analysis of the water of large towns shows that a certain quantity of foreign substance, apparently animal and vegetable matter, is found to impregnate and render it impure. What are the principal sources of such impurities? I suppose them to proceed, first, from liquid filth thrown on the surface of the earth; second, from badly constructed drains in the vicinity; third, from neighboring vaults; and, lastly, from burial grounds, where the bodies are deposited in graves, or accumulated in masses in large tombs.

When the deposit of bodies is made in family tombs, it appears to me not only improbable, but nearly impossible that the putrefying mass can so much impregnate the soil as to penetrate by infiltration to springs or wells. If the tombs are placed under churches or other edifices, where the water from rains cannot reach them, there can be no infiltration, and of course no injury to the springs below.

It must be inferred, then, that the contamination of the waters of cities, from cemeteries in general, if it really exists, is very slight, and certainly less than what proceeds from other causes; that is, from drains, vaults, and house filth.

The case of the cemetery of the Innocens has been considered above to be conclusive, if no positive and satisfactory facts can be adduced on the other side. Such positive facts may exist, but I must confess I have no knowledge of them. During the last yellow fever of New-York, much was said of the fatal effects of the emanations from Trinity Church yard. The same apprehensions arose in regard to the burial grounds in Philadelphia, in the yellow fever of 1798, as already seen in the quotation from Dr. Rush, and the popular feeling, as is usual in such cases, became strongly excited. In conducting investigations of this nature, however, we are not to be influenced by popular prejudice, nor even by the opinion of a few medical men, who have preconceived opinions to support. The question should be, what is the opinion of the medical profession in general, or that portion of it which have experience to observe and judgment to discriminate. I do not recollect that the body of the profession have ever agreed in the admission of fever from a burying ground, in this or any country; and it seems that Dr. Rush, certainly an acute observer, was of an opposite opinion, and probably nearly the whole of the profession in the city in which he lived. Dr. R. believed that the vicinity of the burial grounds was more healthy than other places, because the air in and about them was less confined. This opinion of his was founded on actual observation, and merits great attention; for it shows that instead of being the sources of disease, the cemeteries are of real utility in cities, by preserving a number of spaces where the air may freely circulate, and where an abundant vegetation may serve to disinfect and purify the atmosphere.

The vegetable growth of burial grounds is indeed little more than the common herbage. Its influence, though not great, is of some value. If to this were added plantations of trees, the burial grounds would certainly be most useful to the public health. In what manner it is that the leaves of trees and plants render the atmosphere salubrious, has not been satisfactorily shown. That they actually change the qualities of air, by absorbing some of its essential or adventitious properties and exhaling into it others, is beyond a doubt. There is, also, much reason to believe that, under ordinary circumstances, a reciprocal and beneficial action is exerted on the atmosphere by the respiration of animals and plants. Trees must be considered, therefore, of great benefit to cities. They should be introduced wherever there is room for them. In public and open cemeteries they should be planted, both for the purpose of purifying the air by their leaves, and of imbibing, by their roots, the substances produced by the decomposition of dead bodies.

In connexion with this subject, we cannot pass over a report which has been circulated through the United States, copied, as it should seem, from a French journal. In this we are told that among the deputation of French savans lately embarked for Egypt, there is a commission of medical men, whose object is to ascertain the origin of the plague. At the head of this commission is placed M. Pariset, who has distinguished himself by inventing a *new theory* of the origin of the plague. He supposes this disease to be generated from the putrefaction of dead bodies, which, having been buried, are uncovered and brought to the air by the inundations of the Nile. He has been led to the construction of this theory, it is said, by the coincidence of the first appearance of the plague in Egypt, with the change in the practice of embalming for that of interring the bodies of the dead. This wonderful coincidence is, we are told, sufficient to justify M. Pariset in the doctrine that the plague is the offspring of animal decomposition.

To the physicians of this country, the statement of such a doctrine is a sufficient refutation of it. If there are any persons not conversant in medical matters who have been influenced by such a fancy, we refer them to the facts already quoted from different authors, and particularly to that which refers to the putrefying substance thrown into the canal of Cairo; and that in which it appears that officers and soldiers passed and repassed the bodies of the dead near the bay of Aboukir, in the most active putrefaction and the hottest weather, without ill consequence.

As to the fact that bodies are washed out of their graves by the inundation of the Nile, we know nothing; but we do know that it is after the inundation of the Nile that the whole country is filled with the miasmata from decomposing vegetables, rotted by the moisture of the Nile and the heat of the sun; and we also know that there is no inundation to uncover the dead bodies of the city of Constantinople, and other places, where the plague is continually appearing.

If M. Pariset is the same gentleman who belonged to the French commission sent to Cadiz and Seville, a few years since, to investigate the yellow fever, and who published a splendid quarto volume, with a number of terrifying engravings of this disease, it is to be feared his labors will not bring to light any important phenomena which have escaped the experience of RUSSELL and the sagacity of SENAC.

Let us next proceed to consider the application of the preceding facts to the vaults and drains of cities.

Vaults, constructed as they now are, and thrust into our very houses, by the habits and wants of large towns, are a most serious annoyance to the senses. Their effluvia is so generally experienced, as to afford abundant opportunities for proving that they do not generate fevers. Few persons maintain that they do so, and we shall not waste time in demonstrating the non-existence of a power which is not generally believed in. The harmlessness of such exhalations might be advanced as a proof, on a large scale, of the innocence of decomposing animal substances in causing fevers. We do not, however, consider them as affording any such proof; and not having a particular theory to support, shall not press into our service any facts which do not legitimately belong to it. The contents of vaults are not animal substances; and, although in their chemical composition they are in some respects the same, the state in which their constituents exist is such as to compose a totally different matter.

Although not mischievous in breeding fevers, vaults are pernicious in another way; that is, by corrupting the wells. Their semi-liquid contents, accumulating as they do to a large mass, come at length to exert a considerable pressure on the soil around. Portions of liquids are, in consequence, forced into the neighboring earth; and when, as often happens, they are near to wells, they enter them, and impair the purity of, or in some instances wholly spoil the water. This may be prevented, as I am told by a medical friend, by additional boxing and curbing the well to the depth of about twenty feet.*

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* The water of a large part of our wells is not the best qualified for use. The impurity introduced by animal and vegetable matters is generally slight, and may be removed by boiling. A more important impurity is that from the multitude of saline substances taken up in the passage of water through the earth, and which render it hard or brackish. Such water is always improper, and sometimes very injurious in complaints of the digestive and urinary organs. Clear rain water, and that of the aqueduct from Jamaica pond, is more conducive to health and better for cookery. A copious supply of good water would greatly improve the health of the citizens of Boston. In defect of this, every one who builds a house for his own use, should construct as large and deep a rain-water cistern as he can obtain; and he must take care to have it supplied from the higher parts of his edifices, and avoid that from low sheds and outhouses. In this way he may command an invaluable supply of the most wholesome water. Many persons object to the use of rain water as uncleanly; its cleanliness depends, however, on the manner

This improvement will not, however, be generally resorted to by those who build on speculation, and we must therefore seek some other remedy. Such a remedy may be found ; one of general and easy application, which I shall presently indicate.

Common sewers and drains, or subterraneous passages for conveying away liquid filth, are of great importance in a crowded population. In Rome and some other European cities, these excavations are of such magnitude as to give passage to a cart and horses. Some of the cities of this country are well drained, while others are surprisingly neglected. In the city of New-York, the whole atmosphere is impregnated, in hot weather, with effluvia from house filth, thrown on the surface of the earth and stagnating in yards and streets. Such an atmosphere is very uncomfortable and may predispose to fever. That from this cause the yellow fever has ever been generated, I am not prepared to say.

Boston is tolerably well drained. Nature has given it advantages for carrying off its liquid filth which all cities do not possess. Many of the common sewers, and nearly all the house drains are, however, wretchedly constructed. They are composed of a channel between two rows of bricks, placed on a board and covered by uneven slates and shavings of wood. Liquids, of course, are not confined in this passage. They exude from its sides, penetrate the surrounding soil, and make their way into wells, cisterns, and cellars. Often we find a well is to be newly dug to get rid of a source of impurity, which might be expelled at a cheaper rate by building a good drain. Within a few years, a great improvement has been made by substituting the cylindrical brick sewer, which is impervious and durable.

These drains are used for conveying the washings of houses only. There is another important use to which they should also be applied,—the draining of the fluids of vaults. It has been already shown that these fluids make so great pressure as to force the walls which contain them, contaminate the surrounding earth, and sometimes find a course to neighboring wells. There is no mode in which this can so easily be remedied as by making a passage from the vault to the nearest drain. There should, I conceive, be an ordinance of the police, that every vault hereafter built should have an aperture, covered by a proper strainer, placed at a certain height from its bottom, and communicating with a drain in such a way as to carry off all the fluids deposited there into the common sewer. This plan would have three important advantages. First, it would prevent these fluids from entering the wells ; second, it would lessen the effluvia, by conveying away the liquid and more volatile contents, and keep-

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in which it is received and preserved. These individuals should recollect that the spring water is nothing more than the rains percolated through the earth ; and their prejudices, perhaps, may be further diminished, by knowing that many cities, even in warm latitudes, are supplied wholly from this source. The prejudice against soft water, or, in other words, pure water, is so great in Boston, that I have repeatedly known a spring of the purest and softest water wholly deserted for another in its vicinity, which "had more taste," or, in other words, was brackish.

ing the mass more distant from the surface of the earth; third, this would make it unnecessary to clear out these places frequently, and thus the city would be saved a great expense, and the senses of the inhabitants a horrible and frequent nuisance.

Should it be apprehended that a communication with the vaults would *contaminate* the *common sewers*, a consideration of the facts before stated will wholly remove the ground of that apprehension. The house-washings, containing vegetable matters, are far more dangerous to health than the contents of vaults. Even there is reason to believe that, so far from contaminating the sewers, the liquids from vaults diminish their bad qualities. Probably they, in some degree, decompose the vegetable miasmata. However this may be, it is a fact which I hold from the most intelligent and observing inspectors of the common sewers, that where the fluids from vaults have mingled with the ordinary contents of these receptacles, the effluvia, on cleaning them, is less offensive to the smell than usual.

Vegetable and animal substances of a solid nature are, in Boston, placed in temporary receptacles and carried away in carts. This is the only mode in which they can be disposed of; but the temporary receptacle should be of a form and construction regulated by the police, and the vehicles should be kept in a more cleanly state than has been usual; for the annoyance produced by them has been greater than that from any other nuisance to which the citizens are exposed.

The street dirt, in a northern city, and one in which the streets are so much inclined as in Boston, is of little importance to health. For the sake of comfort, the streets should be sometimes swept, and the carcases of dead animals should be daily removed; but that excessive sweeping, which leaves the pavements unsupported and endangers the limbs of the good citizens and their horses, is neither necessary nor proper.

As these remarks are intended to aid in promoting the public health in Boston, it would, perhaps, not be thought irrelevant to advert to two topics, closely connected with the subject; first, the effect of the vegetable miasmata about the city on the health of the citizens, and, second, the quarantine laws for preventing the introduction of contagious diseases. To consider these subjects with the attention their importance might demand, would too much prolong these remarks. In regard to the first, I will say a few words only.

The malignant epidemic fever, called yellow fever, which has occasionally shown itself in Boston to a limited extent, is caused by *the miasmata arising from the decomposition of vegetable matters.* These miasmata have been generated in a particular district only. Why they have not existed in other quarters, I will not undertake to say. Probably it is in this district only that the necessary degree of *heat*, combined with *moisture* and the *proper material*, is found to exist. I advert to this subject principally in order to state, that if a new street were made on the outside of the marshes or flats of the district where this disease has always appeared, and near to the sea-channel, the cause of the yellow fever in Boston would probably be removed.

As to the quarantine laws, it is, I believe, generally agreed on by the medical profession, that in this country and in Europe they are based on false principles; of course, are more likely to produce than to prevent disease; and that they are a vexatious and useless interference with the interests of commerce. When the police of large cities shall be governed by enlightened observation instead of popular prejudice, the quarantine system will be revised, rendered more efficient, and less onerous.* There is, I suspect, no place where a greater improvement in this department has been effected than in Boston.

The opinions expressed in this paper will, I hope, be found to rest, as they should do, on facts; and to be supported by the experience of my professional brethren. If they were the doctrines or the theories of an individual only, they would not and ought not to have that influence in public improvements, which otherwise they might be expected to do. Should a difference of opinion exist on any important point, I hope these remarks may have the effect to bring it forth; to exhibit the results of greater experience and sagacity, and thus to aid me in attaining the objects I have had in view,—the removal of prejudices and the promotion of the public health and comfort. J. C. W.

II.

Cases of Abortion.

Communicated for the Boston Medical and Surgical Journal,

By Dr. Wm. A. Brewster.

Mrs. —— suffered an abortion Aug. 27th, 1826, at the close of the second month of gestation. She had very slight hemorrhage, and in about a week rode two miles in a chaise and returned at evening. She retired to rest, and was awakened from sleep by profuse hemorrhage from the uterus. She was pale, faint, and pulse almost imperceptible. Large cloths, dipped in cold vinegar and water, were immediately applied to the abdomen, which soon checked the flow of blood. Coagula were formed, plugging the os uteri, which restrained the hemorrhage until they were discharged, when the flooding was renewed. She continued in this alarming state for about seven days, without the true cause of the hemorrhage having been suspected. It was ascribed to riding too soon, before the bloodvessels of the uterus had regained their tone. But at length a coagulum protruded the external orifice, of more than ordinary size and density. A putrid smell being perceived, led us to suspect a retention of the placenta being the cause of the flooding. The mass that filled the os uteri was removed, and to our great satisfaction the hemorrhage ceased. It proved to be the placenta, which we supposed had been expelled with coagula at the time of abortion. The above case shows the necessity of careful examinations of the discharges after abortions, and of the importance of rest until the placenta is expelled.

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* The following is one instance of the unfavorable operation of the quarantine laws.

The summer of the year 1819 was hot, and some appearances of malignant fever in Boston, in the month of July, excited alarm. In the course of this month, arrived the ship Ten Brothers, from Africa, by the way of the West Indies, with a cargo composed of Coffee and other articles. Part of the coffee escaped its enclosures, and being acted on by the moisture in the hold of the ship, became offensive. In this condition, the vessel was made to perform quarantine the usual term in a burning July sun. The law, having been satisfied, the ship was allowed to enter Boston harbor; and measures were immediately taken to free her of the offensive bilge-water and putrid vegetable substances mixed with it.

Nearly all the persons who went on board that ship after the putrid substances were disturbed, were attacked by malignant fever, and to the number of ten or twelve died in from three to five days. Some died in Boston; two in Charlestown, near Boston; one in Portsmouth, sixty miles from Boston; one in Portland, a hundred miles from Boston, and one on Cape Cod. None of them communicated the disease to other persons.

Had the apprehensions in regard to this ship been directed, not to any supposed infection contained in her, but to that vegetable corruption with which she was charged, the evil would probably have been removed early enough to prevent the production of those fatal malignant fevers.

Case II. shows the effect of Sac. Saturni in curing uterine hemorrhage.

Mrs. —— had an abortion before the end of the second month, which took place June 28th, 1827. The discharge of blood was moderate, and the placenta was retained. Manual assistance was of no avail, for it could not be reached. Frequent discharges of blood occurred, which were very alarming to the patient, although not very profuse. In about eight or ten days, the placenta was thrown off by the efforts of the uterus. Blood still continued to flow from the uterus at intervals, and sometimes a constant stillicidium for a considerable length of time. The patient was confined to a recumbent posture, expecting the discharge, which was supposed to be of a lochial nature, to cease. But in this we were disappointed; and after waiting a reasonable time, administered calomel, sulphate of copper, alum, kino, and, by advice of a neighboring physician, tinct. canth. But my patient was still kept in a state of debility by frequent discharges of blood. I then administered sac. sat., 2 to 3 grs., ipecac., 1 gr.; opii, ½ gr.; every six hours. This remedy soon had the effect of stopping the hemorrhage, and my patient convalesced.

Case III. is noticed to manifest the effect of Ergot and Ens Veneris on a case of retention of the placenta, which occurred June, 1828.

In this case, the abortion occurred in the fourth month, the fœtus was expelled without profuse hemorrhage, and the placenta retained. The attending physician told the patient that the placenta was detached, and that a cathartic would cause its expulsion. The cathartic was taken, but the placenta was not thrown off. On the fourth day I was called, and on examination, found the os uteri to admit only one finger, and that the placenta could not be felt. There was no hemorrhage, but a violent oppression and spasmodic pain at the stomach. Opium, in large doses, gave relief. Another cathartic was administered, and stimulating glysters, but without any effect as to removing the placenta. A subsequent examination showed that the os uteri was enlarged, and the placenta could be felt, but appeared adherent and could not be removed. Ergot was administered, in as large doses as the stomach could bear, for forty-eight hours, without causing any uterine pains or any perceptible effect on the placenta. I then directed ens veneris, ferum ammoniacale, in teaspoonful doses, every six hours, to be taken in infusion of tansy. Uterine contraction was soon perceived by the patient, and on the second day the expulsion of the placenta took place.

Hampton, Conn., Feb., 1829.

III.

A Case of Idiocy following Epilepsy, with the Appearances on Examination after Death.

Communicated for the Boston Medical and Surgical Journal.

J. M. B. had been subject to epileptic convulsions from his birth to the time of his death, a period of about twenty-two years. Sometimes he would have several fits in the course of twenty-four hours; at other times, he would go nearly a month without an attack. His stature was about four feet only, and his body and limbs were small in proportion, excepting his hands and organs of generation, which were as large as of a man of full size. When calm and not provoked, (for he was easily excited to violent passion,) his countenance and figure, while standing up, exhibited most perfect idiocy. His knees partially bent, his toes inclining inwards, his shoulders protruding forwards, his head and face a little turned to the right side, with a pouting lip and tongue lolling from his mouth,—all contributed to give the idea that mental capacity was wanting. In fact, his mind was exceedingly imbecile; though at times he would display a degree of cunning such as could hardly be reconciled with his usual impotence. The marks of puberty appeared as early and as fully as usual, and he frequently exhibited great desire to gratify the sexual appetite. A few weeks before his death, he began to show signs of uncommon weakness, though without any increased frequency of the fits, which were soon followed by apparent great internal distress. He was unable to tell whence his uneasiness proceeded, yet it was evident from a continued wringing and twisting of his body, and his frequent loud groans. This state continued for a few days, when his limbs became cold and his lips purple, and he gradually sunk without convulsions. He became blind a short time before death.

Post-mortem Examination, fifty hours after death.—The head only was examined. External appearance, nothing unnatural, except its size, which was quite small. Internally, the dura mater was thought to adhere, with uncommon firmness, to the cranial bones. External appearance of the brain itself quite natural; but upon slicing the cerebrum, it was found much harder, or of much greater consistence than common, and that the medullary bore a far less proportion to the cincritious matter than is usual in sound brains. The septum lucidum had the appearance, and almost the consistence of cartilage. The lateral ventricle, on the right side, was natural, excepting, perhaps, it contained more water than is usual; but in tracing the posterior horn of the left lateral ventricle, at its extremity a hole was discovered, large enough to admit the end of the finger, which communicated with a membranous sac, of about the size of an English walnut, and which was filled with water. When the sac was pressed, the water passed freely into the ventricle. At its most extreme portion, that, viz., which was the posterior termination of the left hemisphere, the membranes of the brain only remained, and formed the sac in that portion of it, the substance of the brain there having entirely disappeared.

IV.

On Inflammation of the Placenta.

By S. J. Stratford, Surgeon.

That inflammation of the placenta will sometimes occur is, I believe, now placed beyond all doubt: the symptoms, and more especially the consequences, do not appear to be fully understood: perhaps, however, the circumstances attending the following cases may tend in some degree to illustrate them.

About the middle of June, 1828, I was called to Mrs. C. who believed herself in about the third month of pregnancy. She had been attacked with pain in the back, extending down the thighs; it had come on gradually, and was attended with symptoms of fever; such as a quick pulse, sickness at stomach, constipation, &c. These symptoms increased; she was attacked with cold shivers, and discharge of blood from the uterus: this and the pains increased; and after a short time an ovum was discharged, with its membranes, placenta, &c. The pains now somewhat subsided; so also did the hæmorrhage; but there was a degree of tenderness experienced upon pressure just above the *symphisis pubis*. This, however, subsided after the administration of some purgative, and sudorific medicines.

Upon examining the ovum I found that the fœtus and all its appendages were present. The placenta was large, soft, and spongy; its surface covered with flakes of coagulable lymph: these were particularly marked upon its inner surface, while some were loose, and easily detached. The fœtal membranes I thought somewhat thicker than usual, and more opaque; the liquor amnii contained small portions of lymph floating in it. The umbilical cord was swelled; and the whole cellular tissue of the fœtus was loaded with a thin serous fluid; in some parts to the extent as almost to render it transparent.

Reflecting upon this case, I am led to conclude that inflammation of the placenta is sometimes a cause of abortion, and that the effects of inflammatory action in this membrane are similar to those which evince themselves in the other animal tissues. The disease appears in some degree to have extended to the structure of the uterus; as may be inferred from the pain on pressure, and febrile symptoms; while the effused lymph decidedly points to the part affected. A very curious, and not the less interesting point, is the effusion of serum into the structure of the fœtus—a kind of congenital dropsy, bearing a very considerable analogy to general anasarca caused by disease of the lungs. The similarity in function of the parts tend to convince us, that although it may differ as to the positive situation of its cause, the effects are the same. These conclusions are also supported by a case which occurred to me while a student in London. I had engaged to attend a poor woman at her labor; when I first saw her she believed herself to be in about the seventh month of her pregnancy; she was particularly large, the abdomen being greatly distended. She had long experienced severe pains in the back, which I suspected might arise from the evident distension of the uterus. About a month after I first saw her, I was called to attend her: before I arrived the membranes had broken, and considerable quantities of water were occasionally discharged. The labor proved tedious, but the child was at last expelled; and I confess I was somewhat surprised to find, although alive, it was completely œdematous; its cellular tissue was filled with serum, as in a common dropsy; the distension of this texture was universal; while in all the parts endowed with a lax cellular tissue it was particularly remarkable. The respiration was very short and quick, evidently oppressed, while the whole of the child felt extremely cold. The umbilical cord was also swelled and full of serum, so much so that I found it difficult to restrain the hæmorrhage by the ligature. The child lived about three weeks, during which period a considerable portion of the serum was removed by the absorbents. The skin now was lax, and the countenance appeared shrivelled and ancient, while general debility was particularly marked; and it sunk without presenting indications of any obvious disease. The symptoms which here presented themselves I am now inclined to believe were caused by inflammation of the placenta; much more chronic, however, than the preceding variety; and the morbid accumulation of the liquor amnii, in all probability, was connected with the existence of the same disease. Some of the symptoms nearly correspond with the description of the compact œdema of infants, as given by M. Leger, and I cannot help suspecting that future experience will confirm the fact, while it will be found that inflammation of the placenta afforded the mechanical obstruction to the fœtal circulation which he imagined was a cause of that disease.

V.

SELECTIONS.

Rupture of the Uterus—Cæsarean Section.

At a meeting of the Medical Society of London, Nov. 17, 1828, Mr. Lord related the case of ruptured uterus, to which he had alluded on the preceding evening. The patient was 36 years of age. At the period when the os uteri was fully dilated, the vagina well lubricated, and a portion of the scalp protruding, all uterine action subsided. Three doses of the secale cornutum were administered, but without producing any marked effect: the parietal bone was felt at the brim of the pelvis. The vectis was used without effect. It was then deemed proper to perforate the head: upon examining, however, previous to this step, it was found that the head had got beyond the reach of the hand, and it was soon seen that all the evidences of a rupture of the uterus were present. Dr. Hopkins saw the patient at this crisis. Upon examination per vaginam, the uterus was found permanently contracted, and although the laceration of the organ could be discovered, it was not possible to reach the fœtus, which was lying in the cavity of the abdomen. It was then, in consultation, determined that the Cæsarean operation should be performed. An incision, half an inch distant from the linea alba, and extending to seven inches and a half, was made; the extremities and trunk of the child presented, and the head, in a very enlarged state from hydrocephalic effusion, was found to have been the cause of the protraction of the labor. During the operation not more than a teaspoonful of blood was lost; the placenta was easily detached, and the wound closed in the usual way. The patient expressed herself greatly relieved by the operation. Leeches were applied to the abdomén, and a mild nourishment given. For a time the patient appeared to rally; she had a quiet night; the pulse, however, was rapid; and death took place eight hours after the operation.

Medico-Chirurgical Society, December 9, 1828.

A paper was read "upon the Morbid Affection in young Children, resembling Hydrocephalus, but arising from circumstances of exhaustion," by Dr. Marshall Hall.

About the period of weaning, or from errors in diet, infants are apt to be affected with diarrhœa. This leads to a state of exhaustion; and in some of these cases there arise symptoms resembling those of hydrencephalus. A similar affection occurs in older children in the course of diseases which have required leeches, purgatives, and other evacuant remedies, which equally induce a state of exhaustion.

In such cases the child dozes, the eyes being half open and unfixed; the conjunctiva is apt to become inflamed from exposure; the pupils are tardily affected by light. The countenance is pallid; the cheeks cool or cold. The unfixed state of the eyes is to be distinguished from strabismus; and the condition of the countenance is to be taken in connexion with the history of the case, in order to establish the diagnosis between this affection and hydrencephalus.

The diagnosis is highly important, for the recovery of the little patient depends entirely upon it. To treat it as hydrencephalus is inevitably to destroy life. Brandy alone can cure.

This affection is by no means rare. It has been slightly described by Dr. Abercrombie in his late work on diseases of the brain: otherwise it appears to have escaped the notice of medical writers. The author describes several interesting cases. The subject is altogether one of great interest and novelty.

Nux Vomica in Chronic Diarrhœa and Intestinal Hemorrhages.

M. Recamier, of the Hôtel Dieu, having learnt that the nux vomica was used in chronic diarrhœa by the practitioners of the north, administered it in the following case, and with success.

A man, fifty years of age, eminently nervous, had been long subject to alternations of bilious diarrhœa and intestinal hemorrhagy, which had reduced him to an alarming state; his lips and countenance were pallid. Sometimes the bil ous flux preceded the hemorrhoidal discharge; at others, the order was reversed. Colombo, semirouba, and powdered charcoal, had been tried without effect. Opium, in the dose of a quarter of a grain, disagreed. One-eighth of a grain of the alcoholic extract of nux vomica was then prescribed. On the following day the stools were reduced from twelve or fifteen to three or four. The dose was then doubled, one-quarter of a grain given, and the patient was speedily cured by this treatment.—*La Clinique.*

Imperforate Anus.

Died at Woodstock, Conn., on the 27th, Ralph Alonzo, infant child of the Rev. Ralph S. Crampton.

The circumstance which occasioned the death of the child, was a peculiar and novel malformation in the inferior part of the pelvis, producing an imperforated anus.

The peculiarity of the case consisted in a tendinous ligament passing laterally across the lower part of the pelvis, about six or eight lines from the sacrum, and about one inch from the anus. To this ligament, the superior and inferior portions of the rectum were perfectly united. The obstruction was discovered about twenty-two hours after birth, by attempting to administer an injection per anum. Surgical aid was immediately procured, and upon examination, the tendinous cord could be felt; but directing the probe either anterior or posterior to this line, it might be introduced a little further up the rectum. Under these circumstances, it was concluded to attempt an opening by an incision: accordingly, a director was introduced, anterior to the ligament, until it met with resistance; a sharp pointed bistoury was then directed up the groove of the director, and an incision made towards the sacrum. A portion of the meconium was then discharged, with the aid of the director. No motion of the bowels could be produced after the operation, and the child expired in about six hours. Upon examination after death, it was found that the point of the bistoury had passed through the anterior part of the inferior portion of the rectum, (which was extended at the time into the form of a sac, by the point of the director,) in front of the ligament; from thence it passed directly into the superior portion of the rectum, which was extended over the ligament in front by the meconium. Thus, a communication was not only made between the two portions of the rectum, but also with the cavity of the pelvis, producing a general effusion of blood throughout that part of the body.

BOSTON, TUESDAY, MARCH 3, 1829.

Compendium of Operative Midwifery; or, the Manual and Instrumental Operations of Preternatural Labors reduced to the greatest Simplicity; preceded by an Investigation of the Mechanism of Natural Labor. From the French of Julius Hatin, *Doctor of the Medical Faculty of Paris, &c. &c. By* Richard Tuite, M. D., *formerly President of the Royal Physical Society of Edinburgh, &c.* New-York and Boston. C. S. Francis and Munroe & Francis. 1828.

Every student of midwifery must have been struck with the elaborate minuteness of detail which characterizes French writers on this subject.

The remark applies especially to labor, the *mechanism* of labor as it is so appropriately termed by them. It hardly seems possible that the fœtus can present in any way, or that there is any portion of it which by any possibility can become the presenting part, which has not been distinctly pointed out by these writers, and the rule of practice laid down with a precision not surpassed in the most mechanical methods. One cannot but be struck, if he be not instructed, by the mathematical accuracy with which the pelvis, the fœtal head, and the mechanism of labor, are described in many of the earlier French authors. It is quite sufficient to refer to Levret and La Motte for confirmation of this remark. The diagrams, with their right lines, circles, and letters of reference, might almost lead you to suppose that a book on geometry had been put in your hands, instead of a humble, practical treatise of midwifery. These remarks are not made to detract from the high value of the works referred to. If studied faithfully, and they can never be understood by the common business of mere *reading*, let the case and the rule be once known, and exactly remembered, and an approximation to the same certainty which characterises much of operative surgery, will belong to midwifery. The work at the head of this notice is strictly French, and it presents in a very convenient form the peculiarities and excellences of the French system. To the student of English midwifery, which is characterised by generalization more than by detail, this work will, much of it, seem very obscure. The whole language he will find new to him, and he will be led to ask himself, "can *presentations* be so numerous and diverse, and can I ever make them out in actual practice?" To those who have been taught after the system of Baudelocque, which is adopted at least by one of our schools, this work will offer great facilities of reference, and forms a neat, convenient manual. It may be further added, that as some patience, some study, will soon enable all pupils and practioners to avail themselves of its helps, it is hoped that it will be favorably received by the profession. Some slight errors and inadvertences were marked in the margin as we read the *Compendium*, but as the purpose of this notice is rather recommendation, than criticism, they need not be specified. In a future edition the translator will probably correct them.

The following extract, taken up without particular selection, will give the reader some notion of the work.

"*General Rules for the application of the Forceps.*

1. Whenever the head of the fœtus is placed in a direct* position, you must introduce in the first place the left branch with the left hand, and then the right branch with the right hand.

2. Whenever the head is placed diagonally, you must observe which extremity of its antero-posterior diameter presents forwards. When the occiput or the forehead is in correspondence with the left cotyloid cavity, introduce in the first place the right branch with the right hand, and then the left branch, which must also

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* We shall always apply the term direct to those positions in which the occipito-frontal diameter of the head is found in the direction of the antero-posterior diameter of the pelvis.

be introduced by the right hand, for in all the diagonals you must introduce both branches with the same hand.

3. When the occiput or the forehead corresponds to the right cotyloid cavity, first introduce the left branch with the left hand, and then the right branch also with the left hand.

4. The branch ought to be so placed, that the old curve of the blades may correspond by their convexity to the concavity of the pelvis, and by their concavity to the convexity of the head.

The new curve ought to correspond by its concavity to the pubis, and by its convexity to the sacrum.

5. The hand which is free ought always to serve as a guide to the branches, and to be directed backwards towards the sacro-iliac symphysis; it ought likewise to be placed between the womb and the head, when the head is still enclosed in the womb, and between the vagina and the head when it has passed through the neck of the womb; in this manner you will most certainly avoid wounding the womb or the vagina.

6. Each branch of the forceps ought to be held, *not* as you would hold a pen in writing, but with a firmer grasp and with the whole hand, the thumb extended on the external side of the articulation.

7. The forceps ought to be warmed and lubricated by an unctuous substance, to facilitate its introduction.

8. The patient ought to be placed in the same position as for a manual delivery.

9. The accoucheur, when about to introduce the forceps, ought to be placed between the thighs of the woman; he directs the blade in the first place back of the head, and afterwards raises it upon its lateral region by means of the hand introduced into the parts. To raise the blade to the place which it should occupy, he glides his index finger behind its anterior cheek, the middle finger behind the posterior cheek, and the thumb under the latter.

10. When the instrument is applied, the accoucheur places himself to the right or left of the handle in the direct position, but constantly behind it in the diagonal position.

11. The hands of the accoucheur, in grasping the forceps when applied, ought to be placed differently in the positions of the superior and inferior straits. At the inferior strait, the hand which grasps the handle ought to be first placed under the instrument, while the other which is near the genitals ought to be placed upon it. At the superior strait it is the contrary; moreover, the index finger of the hand which is near the genitals ought to be carried up to the head, in order to ascertain if it follow the movements which you are endeavoring to execute with the forceps."

WEEKLY REPORT OF DEATHS IN BOSTON,

Ending February 26, at noon.

Feb. 19.	Adeline E. Hartshorn,	17 mo.
20.	Ezekiel Car,	28 yrs.
	Michael Stone,	41
	John Pilsbury,	17 mo.
	Deborah Tufts,	
21.	Robie A. Butler,	18
	Jos. H. Hill,	15
	Mary Steel,	79 yrs.
	Mary Peirce,	20
	Elizabeth Mitchel,	33
22.	Barnard Hunt,	31
	Edward Strain,	2
	Elthier Holt,	4
	Lydia Petty,	40
	Daniel W. Colby,	6 mo.
23.	Hugh R. Kendall,	64 yrs.
	Son of Jacob Page,	6 w.
24.	Wm. Baker Ingalls,	5 mo.
	Hannah E. Daniels,	5
	Henrietta Keen,	22 yrs.
25.	Susanna Bennet,	54
	Thomas Roddin,	38
	Sarah Burge,	64
	Ann Lovering,	69
	John Clifford,	48
26.	Isaac Ridler,	21
	Samuel Hale Parker,	3
	Amanda Brackett,	

Convulsions, 2—consumption, 6—childbed, 1—debility, 1—inflammation, 1—inflammation in the bowels, 2—inflammation in the brain, 1—infantile, 1—lung fever, 5—old age, 1—palpitation of the heart, 1—sudden, 1—teething, 2—unknown, 2. Males, 14—females, 14. Stillborn, 1. Total, 29.

Published weekly, by **John Cotton**, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid.*—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

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February 28, 1829.

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Dr S. Johnson